



Montana Department of
ENVIRONMENTAL QUALITY

WATER PROTECTION BUREAU

Agency Use

Permit No.:

Date Rec'd

Rec'd By

FORM
2-E

Facilities Which Do Not Discharge Process Wastewater

This form must be accompanied by DEQ Form 1. This form is to be completed by manufacturing, commercial, mining, silvicultural, or other dischargers applying for MPDES permits which discharge only non-process wastewater not regulated by an effluent limit guideline or new source performance standard [ARM 17.30.1322 (8)]. See attached instructions. Do not leave blank spaces; if a question does not apply, put "NA" in the space provided. Please type or print legibly; applications that are not legible will be returned.

Section A – Facility/Site Information *(Must be the same as Form 1)*

Facility/Site Name _____

Facility/Site Location _____

Facility Contact /Title _____

Mailing Address _____

City, State, Zip _____

Telephone Numbers () _____

Section B – Receiving Waters

For each outfall, list the latitude and longitude, and name of the receiving water(s).

Outfall Number <i>(list)</i>	Latitude			Longitude			Receiving Water <i>(name)</i>
	Deg	Min	Sec	Deg	Min	Sec	
001							
002							

Discharge Date (If a new discharger, the date you expect to begin discharging) _____

Section C – Type of Waste

Check the box(es) indicating the general type(s) of wastes discharged.

- ☐ Sanitary Wastes
 ☐ Restaurant or Cafeteria Wastes
 ☐ Non-contact Cooling Water
 ☐ Storm Water
☐ Construction Dewatering
 ☐ Contaminated Groundwater
 ☐ Disinfected Water (Hydrostatic Testing)
☐ Suction Dredge *(specify intake size)* _____
☐ Other Non-process Wastewater *(identify)* _____

If any additives are used, list them here. Briefly describe their composition and amounts, (or attach MSDS).

Sections D – G must be completed for each outfall identified in Section B

Outfall #: _____

Section D – Treatment System *(Describe any treatment system(s) or best management practices (BMP's) used to reduce pollutants).*

Section E – Frequency and Duration of Discharge

Except for leaks or spills, will the discharge described in this form be intermittent or seasonal? ☐ Yes ☐ No

If yes, briefly describe the frequency of flow and duration:

Section F – Other Information *(Optional)*

Use the space below to expand upon any of the above questions or to bring to the attention of the reviewer any other information you feel should be considered in establishing permit limitations. Attach additional sheets, if necessary.

Sections D – G must be completed for each outfall identified in Section B

Outfall #: _____

Section G – Effluent Characteristics *(See Instructions)*

Pollutant or Parameter	Maximum ¹		Average		No. of Samples	Analytical Method	Source of Estimate
	Concentration	Units	Concentration	Units			
pH (Minimum)			NA				
pH (Maximum)			NA				
Flow							
Total Suspended Solids (TSS)							
Biochemical Oxygen Demand (BOD ₅)							
Chemical Oxygen Demand (COD)							
Total Organic Carbon (TOC)							
Oil & Grease							
Chlorine, Total Residual (TRC)							
Fecal Coliform Bacteria							
Ammonia, Total, as N							
Dissolved Oxygen							
Kjeldahl Nitrogen, Total, as N							
Nitrate + Nitrite, as N							
Phosphorus, Total, as P							
Total Dissolved Solids							
Specific Conductivity							
Chloride							
Sulfate							
Alkalinity, as CaCO ₃							
Acidity, as CaCO ₃							
Other:							
Other:							
Metals (Total Recoverable), Cyanide, Phenols and Hardness							
Antimony							
Arsenic							
Beryllium							
Cadmium							
Chromium							
Copper							
Lead							
Mercury							
Nickel							
Selenium							
Silver							
Thallium							
Zinc							
Cyanide							
Total Phenolic Compounds							
Hardness, as CaCO ₃							
Use this space (or a separate sheet) to provide information on other metals requested by the permit writer, or general permit.							

Footnote:

1. Except pH, enter minimum and maximum value in applicable row and column.

Section H – Mixing Zone

Is the Applicant requesting a mixing zone in the receiving water pursuant to the Administrative Rules of Montana (ARM) Title 17, Chapter 30, Subchapter 5? ☐ Yes, see below ☐ No

Type of Mixing Zone:

- ☐ Standard Mixing Zone for surface water, see ARM 17.30.516 for informational requirements.
☐ Source Specific Mixing Zone, see ARM 17.30.518 for informational requirements.

Specify which outfalls will require a mixing zone:

001 ☐ 002 ☐ 003 ☐ 004 ☐ 005 ☐

CERTIFICATION

Section I – Applicant Information: This application must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system or those persons directly responsible for gathering the information, it is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violation.

A. Applicant Name (Owner/Operator) *(Must be the same as Form 1)*

B. Name and Official Title (Type or Print)

C. Phone No.

D. Signature

E. Date Signed

INSTRUCTIONS FOR:

Form 2E – Facilities Which Do Not Discharge Process Wastewater

Who Must File Form 2E

Form 2E must be completed in conjunction with DEQ Form 1. This form may be used for facilities which discharge only nonprocess wastewater (process wastewater is water that comes into direct contact with or results from the production or use of any raw material, intermediate product, finished product, byproduct, waste product, or wastewater) and which are not regulated by effluent limitations guidelines or new source performance standards. Your application will not be considered complete unless you have answered every question on this form and Form 1. If an item does not apply to you, enter "NA" (for 'not applicable') to show that you considered the question. If the applicant is providing supplemental information in fulfillment of the required information in this form, attach the material to the application and reference the material in the space provided.

Section A - Facility/Site Information:

Enter Facility Name and other information as it appears on DEQ Form 1.

Section B - Receiving Waters:

Number sequentially each physical structure (outfall) that is used to convey pollutants to a point of release. Outfall means a discrete conveyance, including but not limited to a pipe, ditch, channel, tunnel, conduit, well, etc. List the latitude and longitude to the nearest 15 seconds for this outfall. Enter the name, if named, or the nearest downstream or downgradient state water. State waters means a body of water, either on the surface or under ground and includes, irrigation or drainage systems, ephemeral, intermittent, or perennial waterways, lakes, ponds, reservoirs, or other surface impoundments not used exclusively to treat (sewage, industrial or other) wastes [75-5-103, MCA]; for example: unnamed tributary to Rock Creek; East Bench Irrigation Channel, unnamed stock pond, or Canary Creek. Surface disposal of wastes that may runoff to nearby state waters or infiltrate to ground water are subject to the permitting requirements of the Act.

Section C - Type of Waste:

Check all categories that apply. Describe the use of any chemical additives; Material Safety Data Sheet (MSDS) may be attached.

Section D - Treatment System:

Describe any treatment system(s) used (or to be used for new dischargers), indicating whether the treatment system is physical, chemical, biological, sludge and disposal, or other. Also give the particular type(s) of process(es) used (or to be used). For example, if a physical treatment system is used (or will be used), specify the processes applied, such as grit removal, ammonia stripping, dialysis, etc. If necessary, attach a line drawing of the water flow through the facility with a water balance, see Figure 1.

Section E - Frequency and Duration of Discharge:

Describe the average frequency of flow and duration of any intermittent or seasonal discharge (except for stormwater runoff, leaks, or spills). The frequency of flow means the number of days or months per year there is intermittent discharge. Duration means the number of days or hours per discharge. For new dischargers, base your answers on your best estimate. A discharge is intermittent unless it occurs without interruption, except for infrequent shutdowns for maintenance, process changes or other similar activities. A discharge is seasonal if it occurs only during certain parts of the year.

Section F - Other Information:

This item is intended for you to provide any additional information that you feel should be considered by the reviewer in establishing permit limitations.

Section G - Effluent Characteristics:

All pollutant levels must be reported as concentration or as total mass (except for discharge flow, pH, specific conductance and temperature). Total mass is the total weight of pollutants discharged over a day. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136

methods. In addition, this data must comply with QA/AC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. Grab samples must be used for pH, temperature, total residual chlorine, oil and grease, and fecal coliform. For all other pollutants, 24-hour composite samples must be used. The applicant need not submit data which has been previously reported to the Department on discharge monitoring reports (DMRS) required by an MPDES permit. Any further questions on sampling or analysis should be directed to the Department.

1. Existing Sources

You are required to provide at least one analysis for each pollutant or parameter listed by filling in the requested information under the applicable column. Data reported must be representative of the facility’s current operation (average daily value over the previous 365 days should be reported).

2. New Dischargers

You are required to provide an estimated maximum daily and average daily value for each pollutant or parameter (exceptions noted on the form). Please note that follow-up testing and reporting are required no later than 2 years after the facility starts to discharge. Sampling and analysis are not required at this time. If, however, data from such analyses are available, then such data should be reported. The source of the estimates is also required. Base your determination of whether a pollutant will be present in your discharge on your knowledge of the proposed facility’s use of maintenance chemicals, and any analyses of your effluent or of any similar effluent. In providing the estimates, use the codes in the following table to indicate the source of such information.

<u>Engineering Study</u>	<u>Code</u>
Actual data from pilot plants	1
Estimates from other engineering studies	2
Data from other similar plants	3
Best professional estimates	4
Others	specify on the form

3. Testing Waiver

To request a waiver from reporting any of these pollutants or parameters, the applicant (whether a new or existing discharger) must submit to the Department a written request specifying which pollutants or parameters should be waived and the reasons for requesting a waiver. This request should be submitted to the permitting authority before or with the permit application. The Department may waive the requirements for information about any pollutant or parameter if it determines that less stringent reporting requirements are adequate to support issuance of the permit.

The specific analytical requirements of Section G are waived for applicants applying for coverage under any of the following Department issued MPDES General Permits. However, the applicant must provide the analytical and supplemental information required in the specific general permit. The requested analytical information must be provided in this Section, unless otherwise indicated in the applicable general permit.

- MTG130000 Construction Dewatering
- MTG580000 Domestic Lagoon
- MTG770000 Disinfection Water
- MTG790000 Petroleum Cleanup

Section H - Mixing Zone:

A mixing zone is a limited area of a surface water body or a portion of an aquifer where initial dilution of a discharge takes place and where water quality changes may occur and where certain water quality standards may be exceeded. A person applying for a mixing zone must specify the type of mixing zone and provide the applicable information required by the Department. Mixing zones are described in Title 17, Chapter 30, Subchapter 5 of the Administrative Rules of Montana (ARM). A mixing zone may or may not be granted by the Department based on the criteria established in this rule.

Fees:

The MWQA requires that the Department collect fees sufficient to cover the cost of issuing permits as well as the administrative costs associated with these activities. The Department collects both application and annual fees. Fees vary depending upon the complexity, type and strength of wastewater and the number of discharge points. Fee information is available on the Departments website: www.deq.mt.us or by contacting the Water Protection Bureau at (406) 444-3080. *The Department will not process this application until all of the requested information is supplied, the application is complete, and the appropriate fees are paid.* Return this application form [Form 1] and any supplemental forms, and fee to:

Department of Environmental Quality
Water Protection Bureau
PO Box 200901
Helena MT 59620-0901

Figure 1 - Example of Line Drawing of Applicant's Facility

